

EEC Licensing

POLICY STATEMENT: Safe Sleep for Infants

All of EEC's standards for the licensure of out-of- home care of children require programs to provide care to children in a way that "assures every child a fair and full opportunity to reach his full potential" (See 606 CMR 7.01; 102 CMR 3.00; and 102 CMR 5.00.) In order to reduce the risk of infant death in child care settings from Sudden Infant Death Syndrome, EEC has established the following policy regarding infant sleep practices.

- All programs serving infants must:
 - place infants on their backs for sleeping, unless the child's health care professional orders otherwise, in writing.
 - nap infants in an individual crib, portacrib, playpen or bassinet;
 - ensure that cribs have firm, properly fitted mattresses with a clean fitted sheet, and do not contain any potential head entrapment areas.
 - ensure that slats on cribs are no more than 2-3/8 inches apart.
 - ensure that cribs, portacribs, playpens or bassinets used for sleeping infants under the age of 12 months do not contain pillows, comforters, stuffed animals or other soft, padded materials. [For family child care and large and small group and school age child care, see 606 CMR 7.11(13)(e); for residential care see 102 CMR 3.08(7)(b); for placement programs, see 102 CMR 5 10(4)(a)].
- Beginning December 28, 2012, all cribs in licensed child care programs must comply with current CPSC crib standards. [See 606 CMR 7.14(1).] To demonstrate that a crib meets the current CPSC crib standards, one of the following must be observed:
 - A "tracking label", which is a permanent, distinguishing mark on the crib which contains, at minimum, the source of the product, the date of manufacture, and cohort information, such as batch or run number. (Any date of manufacture on or after June 28, 2011, will be accepted);
 - a registration form including the manufacturer's name and contact information, model name, model number, and a date of manufacture on or after June 28, 2011;
 - a Children's Product Certificate (CPC) or test report from a CPSC-accepted third party lab demonstrating compliance with 16 C.F.R. part 1219 or 16 C.F.R. part 1220.

¹ While manufacturers, importers, and retailers are not required to supply CPCs or test reports to consumers, many will provide these documents upon request, or they post them on their websites. A CPC or test report indicating compliance with any of the following standards is acceptable for full size cribs: F1169-10, 10a, or 11. A CPC or test report indicating compliance with any of the following standards is acceptable for non-full size cribs: F406-10l 10a, 10b, 11, 11a, 11b, 12, or 12a. If a crib purchased after June 28, 2011 does not have a tracking label or registration form, contact CPSC's Office of Compliance and Field Operations at jirgl@cpsc.gov. Receipts alone

 All educators, residential care staff and foster and adoptive parents caring for infants must be trained on the aforementioned requirements and must place children twelve months of age or younger on their backs for sleeping, unless the child's health care professional orders otherwise in writing.

Training must include viewing EEC's training <u>Reducing the Risk of SIDS in Child Care</u>, available in multiple languages at:

http://www.eec.state.ma.us/docs1/Workforce_Dev/SIDS%20revised%20self-study.pps

[For family child care and group child care programs, *See* 606 CMR 7.09(15)(d) and 7.09(17)(a); for residential programs serving children and teen parents, *See* 102 CMR 3.04(7)(g); for agencies offering child placement and adoption services, See 102 CMR 5.10(13)].

Also, children who are younger than six months of age at the time of enrollment must be under direct visual supervision at all times, including while napping, during the first six weeks they are in care, [See 606 CMR 7.10(5)].

All family child care educators must renew training in infant safe sleep with every licensing cycle. Documentation of this training must be submitted with each 3-year license renewal. Training may include viewing of EEC's training Reducing the Risk of SIDS in Child Care, or via another authorized vendor such as those offered by local hospitals or the Department of Public Health.

EEC requires that all group child care educators who work with infants renew their infant safe sleep training with each 2-year licensing cycle. This includes all staff that may provide coverage, even on an occasional basis, in an infant classroom.

- Family child care and group child care programs must provide information to families in writing prior to enrollment of their child regarding SIDS risk reduction practices, including the practice of sleeping infants on their backs. [See 606 CMR 7.08(6)(j)].
- Residential programs serving teen parents must provide information to those parents in writing regarding SIDS risk reduction practices, including the practice of sleeping infants on their backs. Parents should be provided an opportunity to review EEC's <u>Reducing the Risk of</u> <u>SIDS in Child Care</u> at:

http://www.eec.state.ma.us/docs1/Workforce_Dev/SIDS%20revised%20self-study.pps, or safe sleep training. [See 102 CMR 3.07(1)].

- Group child care programs must include in their written health care policy "a plan to ensure that all children twelve months of age or younger are placed on their backs for sleeping, unless the child's health care professional orders otherwise in writing" [See 606 CMR 7.11(19)(a)9].
- Any Family Child Care or Group Child Care program cited for failure to follow EEC's Safe Sleep Regulations and Policy is required to provide written notification of the

are not an indicator of compliance and should only be used to support the documents identified above when determining compliance.

noncompliance and plans to immediately correct it to the parents of infants involved in the noncompliance. See EEC's Safe Sleep Parent Letter - First Visit of Noncompliance Findings. (Per 707.8(8)(f) and 7.07.6(5)

- Any Family Child Care or Group Child Care program cited for failure to follow EEC's Safe Sleep Regulations and Policy a second time is required to provide written notification of the noncompliance and plans to immediately correct it to <u>all</u> parents of infants enrolled at the program. This notification must inform parents that the program risks EEC restricting or revoking the program's license to care for infants. See EEC's Safe Sleep Parent Letter Second Visit of Noncompliance Findings. (Per 707.8(8)(f) and 7.07.6(5))
- In accordance with the recommendations of the American Academy of Pediatrics (October, 2011), programs must comply with the following:
 - o Always use a firm sleep surface. Car seats and other sitting devices are not allowed for routine sleep. Cribs and toddler beds must meet CPSC and ASTM safety standards.
 - o Fluffy blankets, comforters, pillows and the like should not be placed in the crib with the baby. Sleepers and sleep sacks are good alternatives to blankets. However, if a blanket is used, the child's feet must be placed at the foot of the crib; the blanket must be tucked in along the sides and foot of the mattress, and the blanket must not come up higher than the infant's chest.
 - o Wedges, positioners and bumper pads should not be used.
 - o Never prop a bottle or let a baby fall asleep sucking on a bottle of milk. Propping the bottle increases the risk of choking and of ear infections. Falling asleep with milk pooled in the mouth leads to serious dental caries in developing teeth.²
 - Do not rely on home monitors or commercial devices marketed to reduce the risk of SIDS.
 - o Supervised awake tummy time is recommended daily to facilitate development and minimize the occurrence of positional plagiocephaly (flat head).

Failure to comply with EEC's regulations and policies regarding Safe Sleep places infants at serious risk of injury or death.

If EEC determines noncompliance with infant safe sleep, programs will be required to;

- Retrain all educators in EEC's infant safe sleep training.
- Train educators on the following resources about Sudden Infant Death Syndrome (SIDS) and safe sleep practices;

Healthy Children. Org - http://www.healthychildcare.org/sids.html Safe to Sleep - http://www.nichd.nih.gov/sts/Pages/default.aspx#skipnav

• For Family Child Care, the educator must sign EEC's *Provider Safe Sleep Pledge*.

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² After feeding and before putting an infant to sleep, gently wipe any milk residue from her gums. A pacifier can be offered at sleep time instead of a bottle.

- For Group Child Care, the director must conduct random inspections of the infant room and safe sleep practices including documentation of the dates, times, teachers, number of children, and what was observed. Documentation must be available for EEC review.
- For the First Visit of Safe Sleep Noncompliance, as of September 1, 2014 EEC requires that all family child care and group child care programs cited for safe sleep violations inform the family of the infant involved in the safe sleep noncompliance. Please see the "Safe Sleep Parent Letter First Visit of Noncompliance Findings".
- For the Second Visit of Safe Sleep Noncompliance, as of September 1, 2014 EEC requires that all family child care and group child care programs cited again for safe sleep violations inform all parents of infants enrolled in the program of the safe sleep noncompliance and the program's plan for compliance. This letter also shares that the program may be at risk of EEC restricting or revoking the program's license to care for infants. Please see the "Safe Sleep Parent Letter Second Visit of Noncompliance Findings".
- Non-compliance with Safe Sleep requirements may result in legal sanctions against or limitations on a program's license. Sanctions include a freeze on infant enrollment, required training of staff and may include other limitations including a prohibition from the care of infants.

For additional information regarding Safe Sleep practices, see:

- Parent Engagement and Family Support at http://www.mass.gov/edu/birth-grade-12/early-education-and-care/parent-and-family-support/health-and-safety/
- Reducing the Risk of SIDS in Child Care (training) at http://www.mass.gov/edu/birth-grade-12/early-education-and-care/workforce-and-professional-development/training-and-orientation-resources/
- American Academy of Pediatrics at <u>www.aap.org</u>

Questions and Answers about Infant Safe Sleep

Q: What will happen if my child's program is cited by EEC for not following safe sleep procedures?

A: If an EEC licensor finds that your program is not following safe sleep requirements, the program will be cited and be required to immediately correct the unsafe sleep situation. The licensor will return within 7 days to ensure that the program is in compliance.

The program will also be required to;

- Retrain all educators on EEC's infant safe sleep training.
- Train educators on the following resources about Sudden Infant Death Syndrome (SIDS) and safe sleep practices;

Healthy Children. Org - http://www.healthychildcare.org/sids.html Safe to Sleep - http://www.nichd.nih.gov/sts/Pages/default.aspx#skipnav

- For Family Child Care, the educator must to sign EEC's *Provider Safe Sleep Pledge*.
- For Group Child Care, the director must conduct random inspections of the infant room and safe sleep practices including documentation of the dates, times, teachers, number of children, and what was observed. Documentation must be available for EEC review.
- For the First Visit of Safe Sleep Noncompliance, as of XXX date EEC requires that all programs cited for safe sleep violations inform the family of the infant involved in the safe sleep noncompliance. Please see the "Safe Sleep Parent Letter First Visit of Noncompliance Findings".
- For the Second Visit of Safe Sleep Noncompliance, as of XXX date EEC requires that all programs cited again for safe sleep violations inform all the families of infants enrolled in the program of the safe sleep noncompliance and the program's plan for compliance. Please see the "Safe Sleep Parent Letter Second Visit of Noncompliance Findings".
- Repeated non-compliance with Safe Sleep requirements may result in sanctions against or limitations on a program's license, up to and including a prohibition from caring for infants.

Q. What is an "approved" crib, bassinet, port-a-crib etc?

A: Any piece of sleep equipment used must be approved by the U.S. Consumer Product Safety Commission. Beginning December 28, 2012, all programs must be prepared to show documentation that their cribs meet the new standards (16 CFR 1219 for full size cribs or 16 CFR 1220 for non-full size cribs). Beginning June 28, 2011, all cribs manufactured or offered for sale, lease, or resale were required to meet the new crib standards. Cribs should have slats that are spaced no more than 2 3/8 inches apart. A firm mattress must be snug to the crib, port-a-crib etc. The space between the mattress edge and crib should not be more than the width of 2 adult size fingers. The mattress must have a tight fitting sheet. Bumper pads may not be used.

O. How long can I use a bassinet for sleep?

A. Bassinet use should be discontinued once the infant reaches five months old, or once an infant begins moving and turning around unassisted (whichever comes first).

Q. Can I use a cradle or bassinet swing for sleep?

A. A cradle or bassinet swing (an infant swing which is intended for use by a child lying flat) may be used for sleep provided that the surface remains relatively flat both while in motion and while at rest. Use of infant swings must be discontinued when the infant attempts to climb out.

Q. How long can I use a crib to nap a toddler?

A. Toddlers should not be placed in a crib to sleep once they are able to climb out independently. Usually children who are 35" tall and/or are between 18 and 30 months old are able to climb over the side railings of a crib, and should be moved to another sleep surface. Before children reach that age, the crib mattress should be moved to a lower level to protect a baby who can push up on his hands and knees, sit or stand. Further, cribs should *only* be used for napping purposes, and may not be used to "restrain" or "contain" a toddler for the convenience of staff.

Q. When can I transition a child to a mat for napping?

A. EEC regulations require that infants (children from birth to 15 months old) be placed in individual cribs, portacribs, playpens or bassinets for napping. As a general rule, children may be transitioned to a mat or other approved sleep surface for napping at 15 months old. However, under certain circumstances infants age 12 months or older may be transitioned to a mat or cot for rest. **EEC** Policy "Alternative Napping **Infants** Months" for 12 to 15 http://www.eec.state.ma.us/docs1/regs policies/group schoolage policies/20101018 alternative na pping4infants.pdf for required considerations.

Q: What should educators do when an infant falls asleep while they are outside?

A: Educators should not disrupt their program activities if an infant falls asleep while outside, as long as they are safely in a stroller or back-pack. They should still follow all procedures, including not over bundling infants in strollers in the winter, making sure they are not overheated in the summer, making sure they are supervised and making sure nothing interferes with breathing (stroller straps secure but not too tight, no blankets or soft objects in strollers with infants; baby is positioned so that s/he can breathe freely).

Q: What should an educator do if a parent drops off an infant in a car seat and says that the infant just fell asleep? Does the educator have to remove the infant's outerwear and move the infant to a crib?

A: If a parent drops off an infant in a car seat, that infant must be moved to a crib, bassinet, or porta-crib. The educator must assure that the infant is not dressed too warmly for the indoor environment, which may require removing outdoor clothing.

Q: If the infant falls asleep in a swing is it okay to leave them in the swing?

A: If an infant falls asleep in a swing, the infant must be moved to a crib, bassinet, or port-a-crib.

Q: If an infant rolls over on their own, should the educator re-position the infant on their back?

A: Once an infant is able to roll over on their own, the infant should not be rolled back over during nap. The educator must always place the infant to sleep on their back initially and must follow all other safe sleep regulations. The educator must be sure that the infant has enough supervised

tummy time while awake and alert so that the infant can develop proper head and neck control and become comfortable with this position.

Q: Is swaddling allowed?

A: Swaddling may be done for newborns only. The general definition of a "newborn" is an infant between the ages of birth to 4 weeks. Once an infant is able to move their body/limbs out of their swaddle, the educator must discontinue swaddling the infant. It is unsafe to continue to swaddle an infant once they are able to escape swaddling.

Q: What type of blanket may be used for infants?

A: Only a lightweight blanket may be used. The blanket must be positioned according to the "feet to foot" rule, which means that infants must be placed with their feet at the headboard or footboard of the crib and the lightweight blanket must be placed over the infant no higher than their breastbone with the blanket tucked in on the sides and bottom of the crib. Blanket-sleeper type pajamas or sleep sacks are a good alternative to a blanket.

Q: What should an educator do if a parent brings in a special sleep toy?

A: The educator must share the program's SIDS reduction practices which prohibit stuffed animals or other soft padded material in cribs, bassinets, port-a-cribs etc. An educator may use the special sleep toy to comfort the infant before they go to sleep.

Q: What if an infant uses a pacifier to go to sleep?

A: The educator may offer the pacifier to the infant while placing them to sleep. Once the pacifier falls out of the mouth, the educator must remove the pacifier and store it in a safe and sanitary manner.

Q: How close can the cribs, bassinets, port-a-cribs be to each other?

A: They must be at least 2 feet apart.